## 1403-129-1030

FORM 1

Use Only

## STATEMENT OF **ORGANIZATION**

RECEIVED

2014 SEP -2 AM 10. 10

**FEC FORM 1** 

(Revised 06/2012)

1 011111 1								ATT 10: 12
NAME OF COMMITTEE (in full)		eck if name nanged)	Example: If over the life	typing, type nes.	12FE	- L	tice Use Only	CENTER
Alere, Inc. Good Gove	rnment Co	mmittee <u>r</u>	1 1 1 1	1 1 1 1				
<u> </u>	<u></u>							
ADDRESS (number and street)	51 \$aw	yer Rd,						<u> </u>
(Check if address is changed)				11.11		<u> </u>		
	<b>Walthan</b>		<u> </u>		LMA STATE	للنا ل	0,2453 ZIP	CODE A
COMMITTEE'S E-MAIL ADDRE	SS							
(Check if address is changed)	Peter. C	oyle@al	ere.com	<u> </u>		<u> </u>	<u>lli</u>	1 1 1 1 1
• ,		cond E-Mail Ad Ocomeri			<u> </u>			
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COMMITTEE'S WEB PAGE AD	DRESS (URL)							•
(Check if address is changed)			<u> </u>					
			1111		<u></u>	<u>                                     </u>		
2. DATE 08 ' 2	9 / 20	14						
3. FEC IDENTIFICATION N	UMBER ▶	C						·
4. IS THIS STATEMENT	NEW (N	) <b>OR</b>		MENDED (A)				
I certify that I have examined t	his Statement	and to the bes	t of my knowle	dge and belief i	it is true, o	correct and	i complete.	
Type or Print Name of Treasure	Peter D	oyle						
Signature of Treasurer	Soft The second	<u> </u>			Date	[M08 <sup>M</sup> ]	´ [°29° ] ′	2014
NOTE: Submission of false, error				e person signing BE REPORTED \			penalties of	2 U.S.C. §437
Office			For fu	rther information	contact:		FFC FC	ORM 1

Federal Election Commission

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